

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Association of State Democratic Chairs

ADDRESS (number and street)

430 S. Capitol Street SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00259481

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2011

through

06

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ann Fishman

Signature of Treasurer

Electronically Filed by Ann Fishman

Date

07

19

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The Committee has very limited administrative expenses because it contracts for services and does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Association of State Democratic Chairs

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	37018.69
(b) Cash on Hand at Beginning of Reporting Period .....	27096.49	
(c) Total Receipts (from Line 19) .....	25000.00	68753.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52096.49	105771.69
7. Total Disbursements (from Line 31) .....	32363.46	86038.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19733.03	19733.03
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Association of State Democratic Chairs

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	0.00	700.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	700.00
12. Transfers From Affiliated/Other Party Committees .....	25000.00	67600.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	453.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	25000.00	68753.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25000.00	68753.00

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	32363.46	85492.48	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	32363.46	85492.48	
22. Transfers to Affiliated/Other Party Committees.....	0.00	546.18	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	32363.46	86038.66	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32363.46	86038.66	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	0.00	700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32363.46	85492.48
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	453.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32363.46	85039.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Dollars for Democrats

Mailing Address 430 S Capital St., SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: 12-01-02466-04952

Amount of Each Receipt this Period

25000.00

Transfer

**SUBTOTAL** of Receipts This Page (optional) .....

25000.00

**TOTAL** This Period (last page this line number only) .....

25000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Perkins Coie LLP

Mailing Address 1201 Third Avenue, 40th Floor

City  
SeattleState  
WAZip Code  
98101-3099Purpose of Disbursement  
Legal Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02452-04938

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

3300.00

**B.**

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 62071

City  
BaltimoreState  
MDZip Code  
21264-2071Purpose of Disbursement  
Conference Calls

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02454-04940

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

99.99

**C.**

Full Name (Last, First, Middle Initial)

Nexus Strategies, Inc

Mailing Address 434 Fayetteville Street  
Suite 2020City  
RaleighState  
NCZip Code  
27601Purpose of Disbursement  
Consulting Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02455-04941

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

3389.55

SUBTOTAL of Disbursements This Page (optional) .....

6789.54

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
Newark

State  
NJ

Zip Code  
07101-0114

Purpose of Disbursement  
Credit Card Payment - See Memo Items

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-0000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4114.77

**B.**

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-04957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.00

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

JetBlue Airways

Mailing Address 118-92 Queens Blvd

City  
Forest Hills

State  
NY

Zip Code  
11375

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-04966

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

4114.77

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

UPS

Mailing Address 55 Glenlake Parkway, NE

City  
AtlantaState  
GAZip Code  
30328Purpose of Disbursement  
Shipping

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04965

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

18.31

**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04964

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Hilton Hotels

Mailing Address 5001 Spring Valley Road, # 400W,

City  
DallasState  
TXZip Code  
75244Purpose of Disbursement  
Meals

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04963

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

1083.72

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Mourayo

Mailing Address 1732 Connecticut Ave NW #100

City Washington State DC Zip Code 20009

Purpose of Disbursement

Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04962

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

559.25

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

DC Coast

Mailing Address

City Washington State DC Zip Code

Purpose of Disbursement

Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04961

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

37.90

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Westin Hotels Corporate

Mailing Address 1111 Westchester Avenue

City White Plains State NY Zip Code 10604

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04960

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

274.94

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

US Air

Mailing Address 1001 G Street, NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-04967

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

US Air

Mailing Address 1001 G Street, NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-04958

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address 2660 Woodley Road NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02467-04954

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

125.62

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 27

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

<b>A.</b> Full Name (Last, First, Middle Initial) Farifax at Embassy Row	<b>Transaction ID:</b> 21b-01-02467-04956 <b>Date of Disbursement</b>
Mailing Address 2100 Maxxachusetts Avenue, NW	<div> <div>06</div> <div>07</div> <div>2011</div> </div>
City Washington State DC Zip Code 08	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div>11.20</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Westin Hotels Corporate	<b>Transaction ID:</b> 21b-01-02467-04955 <b>Date of Disbursement</b>
Mailing Address 1111 Westchester Avenue	<div> <div>06</div> <div>07</div> <div>2011</div> </div>
City White Plains State NY Zip Code 10604	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Lodging	<div>231.34</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) US Air	<b>Transaction ID:</b> 21b-01-02467-04953 <b>Date of Disbursement</b>
Mailing Address 1001 G STreet, NW	<div> <div>06</div> <div>07</div> <div>2011</div> </div>
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Transportation	<div>27.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Hilton Hotels

Mailing Address 5001 Spring Valley Road, # 400W,

City Dallas State TX Zip Code 75244

Purpose of Disbursement  
Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04959

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

29.19

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City Newark State NJ Zip Code 07101-0114

Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04977

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City Newark State NJ Zip Code 07101-0114

Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04981

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647

City  
DallasState  
TXZip Code  
75235-1647Purpose of Disbursement  
Transportation

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04980

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

129.40

**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04978

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04976

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04975

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

183.40

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04974

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

260.40

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02467-04973

Date of Disbursement

06 / 07 / 2011

Amount of Each Disbursement this Period

230.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235-1647

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04972

Date of Disbursement

/   /

Amount of Each Disbursement this Period

282.40

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address 2660 Woodley Road NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.99

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Enterprise Rent A Car

Mailing Address 600 Corporate Park Dr.

City  
Saint Louis

State  
MO

Zip Code  
63105-4211

Purpose of Disbursement  
Car Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02467-04970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

218.38

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Marriott

Mailing Address 2660 Woodley Road NW

City  
WashingtonState  
DCZip Code  
20008Purpose of Disbursement  
Lodging

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04969

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

61.99

**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02467-04979

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

David Domke

Mailing Address 6811 46th Ave NE

City  
SeattleState  
WAZip Code  
98115Purpose of Disbursement  
Speaking Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02457-04943

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	1	1

Amount of Each Disbursement this Period

639.66

**SUBTOTAL** of Disbursements This Page (optional) .....

639.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Tennessee Democratic Party

Mailing Address 1900 Church Street, Suite 203

City Nashville State TN Zip Code 37203

Purpose of Disbursement  
Transportation Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02458-04944

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

237.90

**B.**

Full Name (Last, First, Middle Initial)

Louisiana Democratic Party

Mailing Address 701 Government Street

City Baton Rouge State LA Zip Code 70802

Purpose of Disbursement  
Reimbursement - See Memo Item

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02459-0000

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

329.30

**C.**

Full Name (Last, First, Middle Initial)

Continental Airlines

Mailing Address PO Box 4607

City Houston State TX Zip Code 77210-4607

Purpose of Disbursement  
Transportation Reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02459-04945

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

329.30

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

567.20

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Hilton Portland &amp; Executive Towers

Mailing Address 921 SW Sixth Avenue

City  
PortlandState  
ORZip Code  
97204-1296Purpose of Disbursement  
Lodging, Meeting Rooms, Catering

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02460-04946

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

15921.19

**B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
NewarkState  
NJZip Code  
07101-0114Purpose of Disbursement  
Credit Card Payment - See Memo Items

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02468-0000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Amount of Each Disbursement this Period

4153.24

**C.**

Full Name (Last, First, Middle Initial)

Yahoo.com

Mailing Address 701 First Avenue

City  
SunnyvaleState  
CAZip Code  
94089Purpose of Disbursement  
Email

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02468-04983

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	1

Amount of Each Disbursement this Period

19.99

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

20074.43

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

A.

Full Name (Last, First, Middle Initial)

ProFlowers.com

Mailing Address 5005 Water Ridge Vista Drive

City San Diego State CA Zip Code 92121

Purpose of Disbursement  
Flowers

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02468-04985

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

64.94

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02468-04986

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Hilton Hotels

Mailing Address 5001 Spring Valley Road, # 400W,

City Dallas State TX Zip Code 75244

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-01-02468-04987

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

163.13

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address P.O. Box 66100

City  
Chicago

State  
IL

Zip Code  
60666

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04988

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Hilton Hotels

Mailing Address 5001 Spring Valley Road, # 400W,

City  
Dallas

State  
TX

Zip Code  
75244

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04989

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

163.13

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

McAfee.com

Mailing Address 3695 Freedom Drive

City  
Santa Clara

State  
CA

Zip Code  
95054

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04990

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

49.99

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02468-04991

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

105.00

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02468-04992

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

105.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

James P. Walsh Sedan Services

Mailing Address 1155 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-01-02468-04993

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Enterprise Rent A Car

Mailing Address 600 Corporate Park Dr.

City  
Saint Louis

State  
MO

Zip Code  
63105-4211

Purpose of Disbursement  
Car Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-05006

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2011

Amount of Each Disbursement this Period

468.42

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Higgins

Mailing Address 1239 Southwest Broadway

City  
Portland

State  
OR

Zip Code

Purpose of Disbursement  
Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04995

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2011

Amount of Each Disbursement this Period

425.98

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address DFW International Airport

City  
Dallas

State  
TX

Zip Code  
75261

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-05003

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2011

Amount of Each Disbursement this Period

25.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Brasserie Montmartre

Mailing Address 626 SW Park Avenue

City  
Portland

State  
OR

Zip Code  
97205

Purpose of Disbursement  
Meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

588.23

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Capitol Hilton

Mailing Address 1001 16th Street

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.90

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address P.O. Box 66100

City  
Chicago

State  
IL

Zip Code  
60666

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-04999

Date of Disbursement

/   /

Amount of Each Disbursement this Period

776.40

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

Capitol Hilton

Mailing Address 1001 16th Street

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-05000

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

170.61

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
Newark

State  
NJ

Zip Code  
07101-0114

Purpose of Disbursement  
Travel Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-05001

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

14.99

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Capitol Hilton

Mailing Address 1001 16th Street

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 21b-01-02468-05002

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

170.61

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of State Democratic Chairs

**A.**

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address P.O. Box 66100

City  
Chicago

State  
IL

Zip Code  
60666

Purpose of Disbursement  
Transportation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02468-04984

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 114

City  
Newark

State  
NJ

Zip Code  
07101-0114

Purpose of Disbursement  
Annual Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02468-05007

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

35.00

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Westin Hotels Corporate

Mailing Address 1111 Westchester Avenue

City  
White Plains

State  
NY

Zip Code  
10604

Purpose of Disbursement  
Lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-01-02468-04994

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

546.92

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

32185.60